

Introductory Course to Personal Health Budgets (PHBs)

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Being comfortable together



- No such thing as a silly question
- Listen to each other with respect
- Everybody's contribution counts
- Mobiles off or on silent
- Give & Get







Introductions





- What is Personalised Care?
- What is a Personal Health Budget (PHB)?
- Legislation, regulations, guidance
- Personal Health Budget process
- Who does what in the delivery of the ICB's PHBs
- Generic PHB process
- Further reading and support

NHS Long Term Plan – New Service Model for the 21st Century



The NHS Long Term Plan was published in 2019 and sets out how the NHS will respond to the challenges it faces related to funding, improving care for patients, removing health inequalities, growing and ageing population and reducing the pressure on staff. The Plan indicated that the NHS for the future would be:

- More joined up and coordinated in its care.
- More proactive in its services it provides.
- More differentiated in its support offer to individuals.

It also mandated **5 major changes** to the NHS over a 5 year period:

- 1. Boost out of hospital care, bringing primary and community health services together.
- 2. Redesign and reduce pressure on emergency hospital services.
- 3. People will get more control over their health, and more personalised care when they need it.
- 4. Digitally-enabled primary and outpatient care will go mainstream across the NHS.
- 5. Local NHS organisations will increasingly focus on population health and local partnerships with local authority-funded services, through the new ICS everywhere.

Thinking About Personalised Care



What does personalised care mean to you?

 Why do you think it is important to deliver personalised care to individuals?

Personalised Care Description



"Personalised care means people have choice and control over the way their care is planned and delivered, based on 'what matters' to them and their individual strengths, needs and preference.

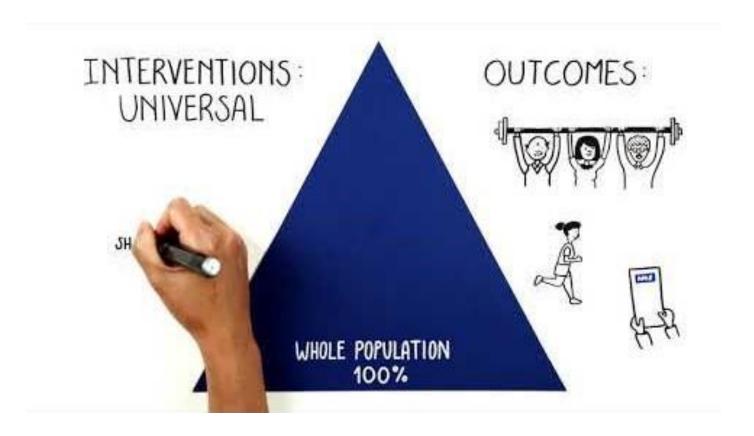
"This happens within a system that supports people to stay well for longer and makes the most of the expertise, capacity and potential of people, families and communities in delivering better health and wellbeing outcomes and experiences."

Taken from the Universal Personal Care – Implementing the Comprehensive Model paper.

What is Personalised Care?



Let's view this video together about the Comprehensive Model of Personalised Care

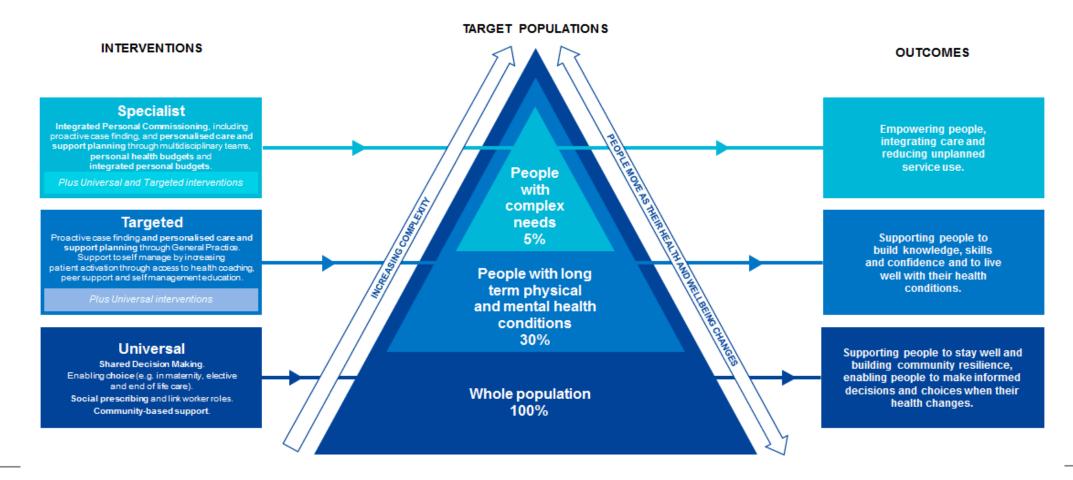




Comprehensive Personalised Care Model

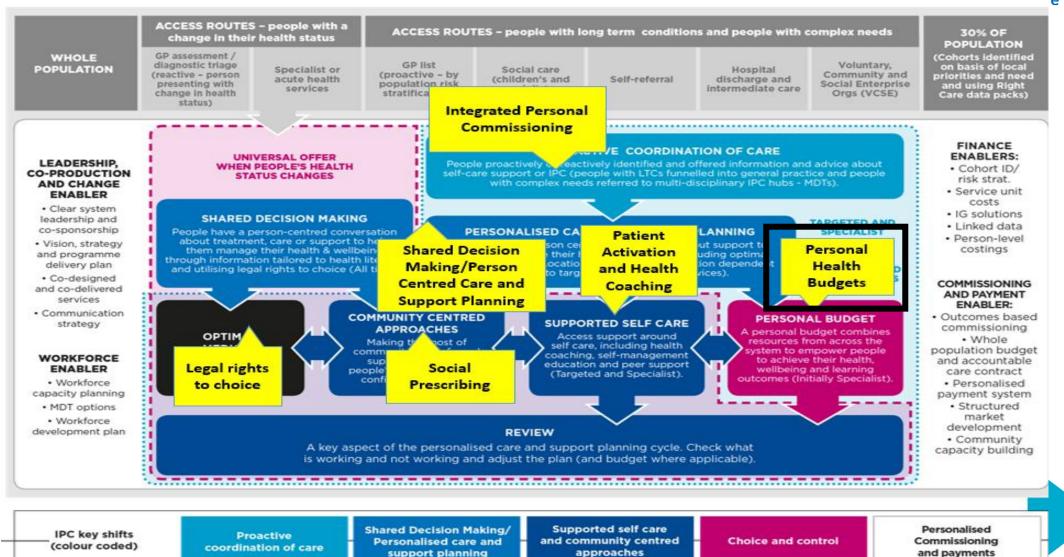
All age, whole population approach to Personalised Care





Personalised Care Operating Model





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Recorded Data about Personalised Care Delivery



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From the Quality Health Survey 2018 (focus on Personal Health Budget and Integrated Personal Budgets), tracking over 9,000 people with long-term conditions across a health and care system, evidence has shown that people who are more confident and able to manage their health conditions (that is, people with higher levels of engagement/activation) have:

- 18% fewer GP contacts.
- 38% fewer emergency admissions than people with the least confidence.
- Personalised care also has a positive impact on health inequalities, taking account of people's different backgrounds and preferences, with people from lower socio-economic groups able to benefit the most from personalised care.

Taken from the Universal Personal Care – Implementing the Comprehensive Model paper.

Thinking Differently to Deliver Personalised Care



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System change towards the person

Move away from needs, problems and symptoms (rather than 'what's the matter, what matters to the person' to achieve health outcomes).

Mindset change – values, attitude and behaviour to care and support (carer and hours – assistive tech).

Collaboratively agenda setting with the person (appointments, consultation, interactions) solving problems and action planning.

Better conversations – active listening and motivational talking (power shift – person is supported to lead the agenda).

Benefits for the person and System

Build upon skills, value, experience, expertise and health literacy - patient engagement/activation to independently manage their care and support.

Focus on potential strengths and community assets available to provide and supplement care and support.

Priorities and patient preference – what matters to them to achieve health outcomes

Allow the person to suggest solutions to achieve health goals/value for money for the NHS

Personalised Care Institute website e-courses available



Quality-assured personalised care training
Access short modules for free online at the home of personalised care education

www.personalisedcareinstitute.org.uk

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Integrated Care Board

| | | Integrated Care Board |
|--|--|---|
| Overview of personalised care - core skills | Personalised care core skills highlighting the benefits of personalised care and how it improves health outcomes and patient and clinician satisfaction. Your learning options (personalisedcareinstitute.org.uk) | 1hr Level 1&2 CPD Points and Cert |
| Shared Decision Making (SDM) | Shared Decision Making (SDM) – develops the theme and the process by which people are supported to understand their options and are given the opportunity to consider relevant information that might influence their choice. Your learning options (personalisedcareinstitute.org.uk) | 30 Minutes Level 3 CPD Points and Cert |
| Personalised Care and Support Planning (PCSP) | Personalised Care and Support Planning (PCSP) training helps people to have a different kind of conversation about health and care, focusing on what matters to the person as well as their clinical and support needs. This leads to a single plan that is owned by the individual and accessible to those supporting the person. Your learning options (personalisedcareinstitute.org.uk) | 45 minutes Level 3 CPD Points and Certificate |
| Personalised Care and Support Planning (PCSP) Maternity | A more tailored version of the PCSP plan is available for personalised maternity care to support women to make safe and informed decisions during antenatal care and delivery. <u>Your learning options (personalisedcareinstitute.org.uk)</u> | 30 minutes Level 3 CPD Points and Cert |





What is a Personal Health Budget?

What is a Personal Health Budget?



"A Personal Health Budget is an amount of money to support a person's identified health and wellbeing needs, planned and agreed between the person and their local NHS team"

What is a Personal Health Budget?



Let's watch this video together about PHBs.



Aim of the Personal Health Budget



 To give people greater choice, flexibility and control over the health care and support they receive.

 Personal health budgets are not about new money, but about using resource differently.

• An opportunity for people to work in **equal partnership** with the NHS about how their health and wellbeing needs can best be met.

History of Personal Budgets



- 1970s, **Independent Living Movement**, born out of the disability rights movement in the 1960s. The intention was for disabled to have **equality**, **choice and control** and a **better quality of life**.
- 1978, Project 81 formed, it took 3 years for a group of disabled people to negotiate a budget and move out of a care homes and into the community with paid carers. This brought about the emergence of Independent Living Centres.
- 1986, closures of adult and children social care homes, and the introduction of individual funding for care and support.
- 2003, In Control organisation formed, made up of individuals who wanted to make life better for families with individuals with disabilities. This group pioneered the concept of self-directed support and developed personal budgets as a way for people to take control of their life. They piloted this model across six areas in England, which brought about real, sustainable benefits for disabled people with no increase in costs.
- 2007, Putting People First Policy Transforming Adult Social Care, this promoted personalisation and personal budgets.
- 2009-2012, NHS piloted Personal Health Budgets (PHBs); successful outcomes achieved.
- 2013, development of the National Health Service (Direct Payment) Regulations 2013.
- 2014, "Right to Ask" for a PHB from CHC patient cohorts.
- 2019, "Right to Have" a PHB for CHC, CC, PWB and S117 Mental Health clients.

Who can receive a Personal Health Budget? North Central London Integrated Care Board

These individuals have the 'Right to Have' a PHB by law:

- People eligible for Continuing Healthcare (CHC) and Continuing Care (CC).
- People with ongoing social care and education needs, who also make regular and ongoing use of relevant NHS services.
- People eligible for Section 117 aftercare services.
- People leaving the Armed Forces, who are eligible for ongoing NHS services.
- People with a learning disability, autism or both, who are eligible for ongoing NHS care.
- People who access wheelchair services whose posture and mobility needs impact their wider health and social care needs.

However...

Anyone has the Right to Ask for a PHB. This means that, if an NHS service can make a budget available to individuals to receive a Direct Payment (cash payment; not tied into a block contract) to pay for a service to meet their assessed needs, not currently available on the NHS, could receive a PHB.

Personal Health Budget Expansion Agenda



Where PHB delivery is planned for the future:

Planned for the future

- Choice in End of Life Care
- High Intensity Users (i.e. A&E)
- Renal Transplant
- Neurological disability
- Veterans

Recorded Data about Personal Health Budgets

Integrated Care Board

From the Quality Health Survey 2018 (focus on Personal Health Budget and Integrated Personal Budgets):

- 86% of people with a PHB said that they had achieved what they wanted with their PHB.
- 77% of people would recommend them to others.
- PHBs in NHS Continuing Healthcare (CHC) have also been shown to achieve an average 17% saving on the direct cost of home care packages.

Taken from the Universal Personal Care – Implementing the Comprehensive Model paper.

People's Experience in 2019 and the Importance of Getting It Right



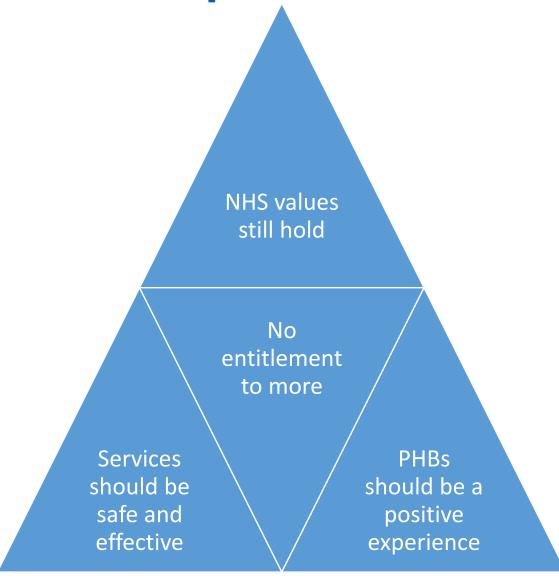
The Quality Health was repeated in 2019 with 419 PHB holders:

- 27% unreasonable restrictions on how to spend the money.
- 42% difficult to get PHB information.
- 34% said poor quality support to navigate suppliers, providers, PAs, products.

Taken from the Universal Personal Care – Implementing the Comprehensive Model paper.

PHB Principles





- Access to services that best suit the individual.
- Shared decision making.
- Support planning is key.

What is Excluded?



- GP services (GP contract)
- Acute unplanned care (including A&E)
- Surgical procedures
- Medication
- NHS charges e.g. prescription charges

- Vaccination/immunisation
- Screening
- Gambling, debt repayment, alcohol, tobacco

What the Personal Health Budget Can be Spent On?



Anything agreed in a personalised care and support plan which will meet health and wellbeing outcomes, for example:

- Equipment
- Personal care
- Complementary therapies
- Supportive technology (e.g. computers, iPads, Kindles)

Services should be appropriate for the State to provide.





Legislation, regulations, guidance

Legislation and Regulations



- The Health Act 2009
- The NHS (Direct Payments) Regulations 2013
- The NHS (Direct Payments) (Amendment) Regulations 2013
- The NHS Mandate
- Five Year Forward View 2014
- Five Year Forward View Into Action Planning for 2015/16
- The National Health Service (Direct Payments) (Amendment) Regulations 2017
- Long Term Plan 2019
- Universal Personalised Care Implementing the Comprehensive Model

Legal Duties



- The ICB is required to grant a personal health budget to a person who requests one, unless it is not appropriate in the circumstances.
- This means that people have the 'right to have' a personal health budget.
- Publicise and promote the availability of PHBs and provide information, advice and other support about them.
- Provide information, advice and other support to eligible persons and their representatives to assist them in deciding whether to request a personal health budget in respect of a relevant health service.





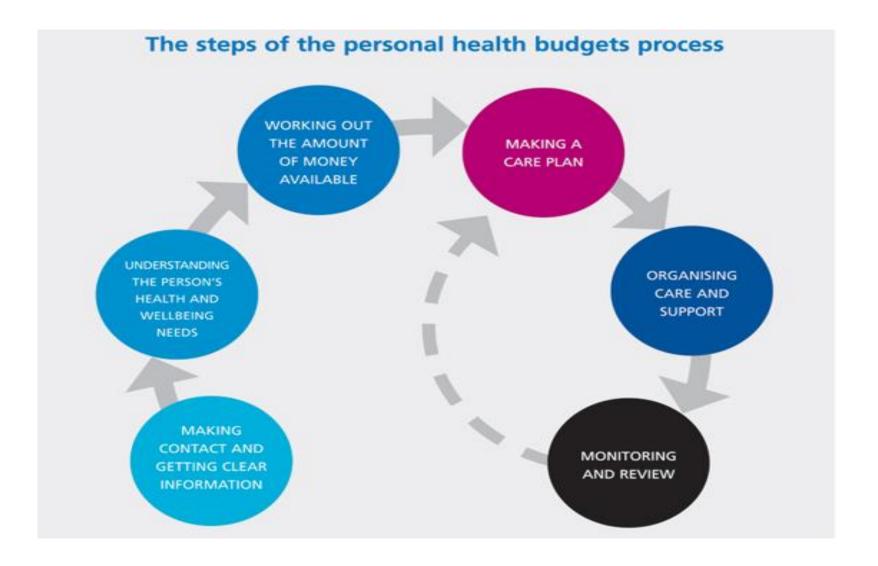
How to Deliver Personal Health Budgets

The Steps of Personal Health Budget Process



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Short Video about Shaneez and her PHB



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Let's watch this video together about Shaneez, who was one of the first person in Newham to have a PHB. Her mother describes how the increased choice and flexibility has transformed their lives.

https://www.youtube.com/watch?v=bOYQR08 z70



Break







The 5 Parts Summary to Receiving a Personal Health Budget



This is essential for the person receiving a PHB to know...

THE ESSENTIAL PARTS OF A PERSONAL HEALTH BUDGET

The person with the personal health budget (or their representative) will:

- be able to choose the health and wellbeing outcomes they want to achieve, in agreement with a healthcare professional
- know how much money they have for their health care and support
- be enabled to create their own care plan, with support if they want it
- be able to choose how their budget is held and managed, including the right to ask for a direct payment
- be able to spend the money in ways and at times that make sense to them, as agreed in their plan.

Things to Consider When Implementing Personal Health Budgets



- Current care provision and funding arrangements
- Risk assessment: clinical and financial, compliance with statutory requirements
- Process for ICB to take over funding:
 - Self-funded arrangements
 - Social care direct payments
- Open and transparent communication with the person / family about what PHBs mean for them: what stays the same or may need to change
- Timing





Initial Conversation

- Making contact
- Clear information
- Understanding health needs





Budget Setting

Indicative Budget



- Best estimate of how much assessed care / services will cost:
- For example, continuing healthcare should be similar to that of a traditional commissioned package.

Acronym **CUTE** – will ensure a successful indicative budget

- Clear personalised communication.
- **U**pfront manage expectations regarding the money.
- Transparent in what the person can and cannot spend the money on.
- Enough contingency money to cover unplanned events.

A person should not top up their PHB.





Personalised Care & Support Plan (PCSP)



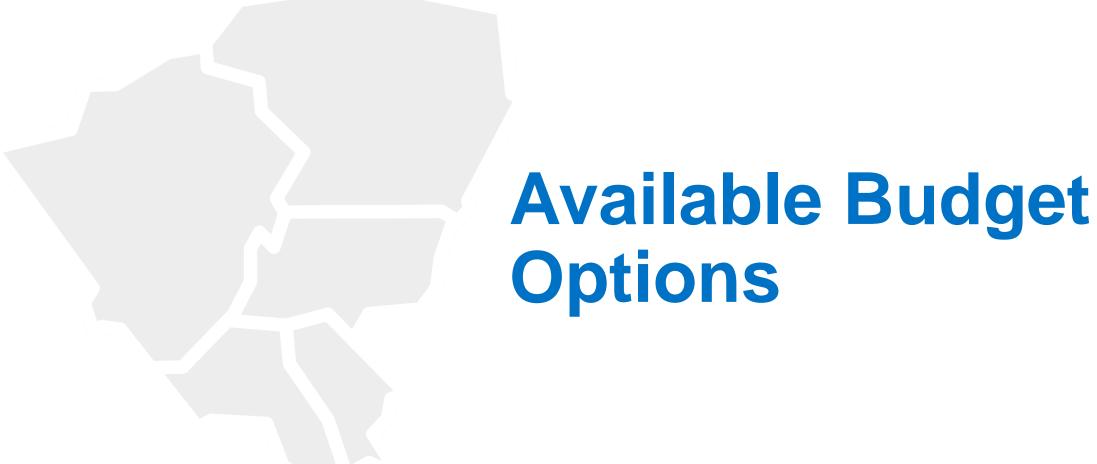
- Who, if at all, does the person want to support them in this process?
- Should focus on the whole life of the person not just the health needs.
- Tailored towards the background and culture of the person receiving care.
- Consider education, employment, social interactions.
- Contingency plan to be included.
- It is the contract between the person receiving care and the NHS.

What to Include in the PCSP?

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- · Person's contact details
- Details of the person's representative.
- Details of their advocate/advocacy service used.
- How the person's preferred way to communicate and what support is needed.
- Assessed health & wellbeing needs and agreed outcomes.
- Name of Case Manager for the person.
- How care and support will be delivered including unpaid care.
- How the PHB will be managed (Notional Budget, Direct Payment and Third Party)
- Details PHB support services that will be used to support the person.
- Start date for the care and support.
- How and when reviews will take place.
- Procedure to discuss and manage potential risks.
- Where people lack capacity or are vulnerable, plan should consider safeguarding, promoting liberty, etc.
- The amount of the budget and how this has been arranged to cover the costs of planned care and support plus employer's liabilities (employer insurance, pension costs, DBS etc.)
- Contingency plan for unplanned events related to care and support for daily living.
- Mandatory training and equipment needed.





Options to Manage the Budget



Notional Budget

Money is held by the NHS (in-commissioned service).

Third Party Budget

Money is paid to an organisation that holds the money on the person's behalf.

Direct Payment

Money is paid to the person or their representative into their bank account/ewallet.

Some people might have a Managed Account to hold their Direct Payment.

Notional Budget



Notional budget, is held and managed by the NHS, however the person receives:

- Upfront information about the cost of their care and support.
- The option of having a Direct Payment or a Third Party Budget.
- Support to develop a Personalised Care and Support Plan.

Third Party Budget



- Different from a Managed Account (a Direct Payment holding account service).
- Independent organisation from the person and the NHS, and is regarded as the employer of the care and support staff employed. Manages the PHB and arranges support by purchasing services on the person's behalf according to their agreed Personalised Care and Support Plan. The service might also complete on-going case management support with the person eligible for the PHB and their Case Manager.

Direct Payment



- Money is paid directly to the person or their representative into a separate bank account and the person becomes the employer.
- The person might decide to have a Managed Account to hold their PHB and pay for care and support costs according to their agreed Personalised Care and Support Plan or Payroll only service to help them to produce calculate what costs need to be paid each month to HMRC and pensions and produce a payslip.
- Guidance for Direct Payments for Healthcare: Understanding the Regulations states:

"A direct payment can <u>only</u> be used to pay an individual living in the same household, a close family member, or a friend, if the ICB is satisfied that, to secure a service from that person, is necessary to meet their care needs".

Integrated Budget



- If an eligible person has assessed needs supported by education, health and social care, they might be entitled to a personal budget. For consistency, rather than the person having three personal budgets, all the funds will be paid into one Integrated Budget which is managed by one agency.
- The person still has the choice and control to choose how they receive their personal budget, which might be as a Notional Budget, Direct Payment or Third Party.





Monitoring and Review

Monitoring of the Budget



- Monitoring of the Direct Payment and Third Party Budget takes place every three months, this is completed by the individual or money management service.
- Evidence of PHB payments/statements are sent to the ICB who will review the spends to ensure it relates to what has been agreed in the Personalised Care and Support Plan.

When PHB Reviews Can Take Place



Reviews can take place:

- 3 months after PHB set-up.
- At least annually.
- At a clinical appropriate interval.
- When individual is re-assessed.

Best practice – link with other opportunities around assessment and review, to streamline the process.

Indicators of Successful Implementation of PHBs



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- Reviews of PHB show outcomes have been achieved.
- Reduction in crisis calls to service.
- People resolved own issues using contingency planning detailed in their agreed Personalised Care and Support Plan.
- After PHB starts, decrease in the number of medical interventions required compared to previous years.
- Less complaints received from people related to their care and support.
- individual feedback POET (Personal Outcome Evaluation)

Better Quality of Life with a PHB



Forzana Nasir, Lived Experience, Peer Leader with NHSE





Case Manager Responsibilities in the Delivery and On-going Management of PHBs



| Complete Personalised Care and Support Planning with individual or support the person to complete it for themself (This relates to Notional, Direct Payment and Third Party). | Work with the individual to complete contingency planning and ensure that there is sufficient budget to pay for this and is recorded in the Personalised Care and Support Plan. |
|--|--|
| Identify the specialist and mandatory training and record in the Personalised Care and Support Planning. Act as lead care coordinator for on-going case management for the PHB individual and PHB care package. Complete on-going risk and financial assessment of PHB care package. Send out PHB letters to do with the start, end, termination, and suspension of PHBs. Make decision regarding monitoring actions, value of clawbacks and recharges. Support unpaid carer's well-being in relation to respite or referral for LA carer's assessment. | During eligibility reviews, also complete PHB care package review, and confirm the following: Care and support arrangements at home are safe. PHB employer has valid Employer Public Liability and Public indemnity insurance in place. Each staff member has healthcare task insurance (so they can access mandatory training online). Equipment has been serviced and in good working order. Paid and unpaid staff have completed mandatory training as detailed on the individual's Personalised Care and Support Plan. |
| Ensure that the individual's budget meets the cost of their assessed care and support delivery. | Provide on-going information, advice, and guidance on PHBs, and be clear of the benefits and resources available to support conversations (leaflets and videos) |
| Create a referral for an interim Care Package. | Create a referral for Indicative Budget based on Care Plan created. |

PHB Employer Responsibilities in the Delivery and On-going Management of PHB



| Work with the Case Manager to develop their Personalised Care and Support Plan (doing as much or as little as they want). | Ensure arrangements are in place concerning workplace pensions for staff and employer contributions are made. |
|--|---|
| Agree how health outcomes will be achieved in a way that makes sense to them, and within budget. Sign the ICB PHB Contract at the start of receiving a PHB. | Manage their budget and make payments according to their Personalised Care and Support Plan Participate in ICB reviews concerning eligibility and PHB care package. |
| Agree approach for managing their PHB budget and paying employer liabilities. | Participate in ICB quarterly money monitoring activity to evidence that the PHB spends are in line with their Personalised Care and Support Plan. |
| Ensure the PHB individual's home, which is a workplace, is clean, free of trip hazards and safe for staff to use. | Ensure all staff members have completed mandatory and specialist training as described in the Personalised Care and Support Plan. |
| Contact Case Manager if there are concerns about health needs, budget, or training requirements. | Ensure: Employer Public Liability and Public Indemnity insurance are renewed and valid. Each member of staff has healthcare task insurance in place to access online training via insurance firms. All safety equipment has undergone annual servicing and has a certificate to verify this. |
| Each member of staff has a contract of employment. | Inform Case Manager when staff leave and start employment. |

Brokerage/ Commissioners Responsibilities in the Delivery of PHBs



| Broker interim care package while the Direct Payment is set up (this might take up to 6-12 weeks). | Work out the Indicative Budget based on the cost of an ICB commission service. |
|---|---|
| Process referral documentation to My Support Money (MSM) and other Providers with completed Personalised Care and Support Plan and Indicative Budget. | Send individual PHB contract to sign; PHB should not begin until contract is signed. |
| Send Introductory letter to PHB individual regarding working with MSM or other Provider. | Refer all communication received by MSM or other Provider to Case Manager for action, as well as record on Caretrack. |

My Support Money (MSM) or Other Provider Responsibilities in the delivery of PHBs



| Setup a money management service. The money management service might include: Payroll only service. Invoice only service. Managed/holding account. | Ensure that the PHB employer and healthcare staff are registered on training portal to undertake mandatory training as outlined in the Personalised Care and Support Plan. |
|--|---|
| Broker the recruitment of personal assistants, complete DBS checks and co-produce contract of employment and workplace policies. | Work out the hourly rate the PHB employer can afford to pay staff. |
| Identify and broker specialist healthcare task training, if necessary. | Calculate the final PHB budget based on all employer liabilities (includes specialist training costs, consumable costs, contingency costs, equipment costs as described by the Case Manager). |
| Broker Employer's Public Liability and Public Indemnity insurance and healthcare task insurance for each member of staff employed. | Register PHB individual as an employer with HMRC and pension provider. |

ICB Teams Responsibilities in the Delivery of PHBs



CIC Invoice Team

This is not an exhaustive list of activities.

| Review KPI money management monitoring report received from MSM or money management service Provider. | Prepare and compile money monitoring report for PHB Panel Agenda. |
|---|---|
| Complete financial actions as instructed by the Case Management Team, such as clawback and recharge. | Escalate safeguarding concerns concerning the PHB care package. |

PHB Team

| • | Provide support with PHB development/implementation, advice, and guidance. | Review and approve Direct Payment/Third Party set ups at PHB Panel (held weekly or Monday). | ıa |
|---|--|---|----|
| • | Review monitor report and make decisions accordingly. | Escalate safeguarding concerns concerning the PHB care package. | |





Generic PHB Set Up Process (Please follow own service area PHB process, if one exists)

Case Manager confirms client is eligible for PHB funding;
Client advises Case Manager of which PHB method to receive
(Notional, Direct Payment or Third Party; issue PHB leaflet to client if necessary)



Case Manager emails Brokerage: nclccg.cicchcauthorisationrequests

@nhs.net

and cc PHB team mailbox:

nclccg.personalhealthbudgets.net
with a CIC Request & Authorisation
template asking for an Indicative
Budget and/ or Commissioning Care
Package

(based on the cost of an NCL ICB commissioned package of care; please note if the PHB individual intends to employ their own staff through external traditional recruitment methods, this might take 8 to 12 weeks; an interim domiciliary care package might be required)



Case Manager should have received Indicative Budget before contacting the client to complete personalised care & support planning Case Manager acquires authorisation in own service area of the personalised care and support plan and chosen PHB method.

For Notional Budgets, update the care and support plan with PHB start date, and issue client with a copy of the plan with a PHB Start Up Letter, and finally upload to Caretrack (must have gone through Quality Assurance Framework process)



Case Manager emails Brokerage: nclccg.cicchcauthorisationrequests@nhs.

net

and cc the PHB team mailbox: nclccg.personalhealthbudgets.net
The email must contain a completed

- CIC Request & Authorisation template asking for a PHB Set Up (clearly stating PHB method: Direct Payment or Third Party)
- 2. Personalised care and support plan



PHB Officer will place
1) CIC Request and Authorisation template, and
2) Personalised care and support plan on PHB Panel Agenda;
Case Manager will attend to present the case;

PHB Officer will record PHB Panel decision outcome on Caretrack

(Notional Budgets are not considered at the PHB Panel unless the support is not routinely commissioned by the ICB)

PHB Officer will send PHB Panel cases through the authorisation process



Case Manager informs the client of the outcome of the PHB Panel decision



Brokerage to populate
Caretrack with PHB budget
breakdown



Brokerage will email client PHB introductory letter re: MSM and PHB contract



Brokerage to email MSM a referral form and client personalised care & support plan

(PHB contract must be signed and returned to Brokerage before the MSM referral is processed for PHB set up, and PHB start date issued)



MSM will contact client and set them up.

MSM will inform NCL ICB when the client is set up



Brokerage to update Caretrack with MSM outcome



Brokerage to email Case Management Team and CC: PHB mailbox and MSM, to inform them that the PHB has been set up, start date and for them to speak with the client and book the 12 week PHB review



Case Manager to

email/post the

PHB client a PHB

Start Up Letter

with the updated

care and support

plan to indicate

the start date of

care and support,

finally upload to

Caretrack

ICB Case Management Team

COLOUR KEY

Brokerage Team

MySupport Money/ My Support Broker

CIC Invoice Team

PHB Panel

Generic PHB Quarterly Money Management Monitoring Process



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Provider will email quarterly KPI monitoring report to PHB mailbox at: nclccg.personalheal thbudgets.net

'Children's
Continuing Care
Commissioners (non
MSM PHBs) will
email quarterly KPI
monitoring report to
the PHB mailbox at:
nclccg.personalheal
thbudgets.net





PHB Officer will receive the KPI monitoring report and send to Invoice Team for review



Invoice Team review the KPI monitoring report, and prepare report for PHB Panel Agenda

PHB Officer places the KPI monitoring report on the PHB Panel Agenda for:

1) Noting,
2) To handle issues,

- 3) Decide upon clawback action
- 4)To escalate issues to ICB Case Management Team for action



PHB Officer on Caretrack, under the PHB individual's record, upload the PHB KPI monitoring report, PHB Panel decision to the 'PHB Audit' folder, and add the date.

PHB Officer will also escalate the PHB Panel decision to the Case Management Team for action



Case Management Team take the necessary actions including decision on the amount of clawback

(When arriving at an amount to clawback, please liaise with the PHB individual to ensure that sufficient funds remain to pay for respite activity and consumable costs; client must have at least 8 weeks of funds to pay for their care and support needs)

When actions are complete or there is an issue, email the PHB Team's mailbox on **nclccg.personalhealthbudgets.net** to let them know.

Invoice Team complete action as per Case Management Team instruction such as clawbacks, recharge

COLOUR KEY

PROVIDER

- MSM
- Local Authority (Integrated Budgets)

ICB Case Management Team

Brokerage Team

Provider

CIC Invoice Team

PHB Panel

PHB Generic PHB Process



Please click the PDF icon for the complete NCL ICB's Generic PHB Processes as well as the PHB set up process for Mental Health, Learning Disabilities and Autism and Children and Young People services.









Quiz – Question 1



Do we have to inform people of their right to have a personal health budget?

- A) Yes
- B) No

Quiz – Question 1 Answer



Do we have to inform people of their right to have a personal health budget?

- A) Yes
- B) No

The duty to inform those eligible individuals of the right to have a PHB and is set out in the standing rules.

Quiz – Question 2



Do people have a right to have a direct payment?

- A) Yes
- B) No

Quiz – Question 2 Answer



Do people have a right to have a direct payment?

A) Yes

B) No

People eligible for CHC, CC, Mental health, PWB have a right to have a PHB, not a right to have a direct payment. Everyone can ask for a PHB, but they may not be eligible or a direct payment might not be available to them because of a block contract arrangement.

Quiz – Question 3



Do we have to provide information, advice and support on personal health budgets?

- A) Yes
- B) No

Quiz – Question 3 Answer



Do we have to provide information, advice and support on personal health budgets?

A) Yes

B) No

"ICBs must publicise and promote the availability of personal health budgets and provide information, advice and support to those eligible, their representatives, families and carers, to help them decide if a personal health budget is right for them."

(Extract from Guidance on 'The Right To Have').

Quiz – Question 4



How often should a support plan be reviewed? (N.B. Multiple responses possible)

- A) Never
- B) Every 6 months
- C) At clinically appropriate intervals
- D) At 3 months
- E) When individual is re-assessed
- F) At least annually

Quiz – Question 4 Answer



How often should a support plan be reviewed?

- A) Never
- B) Every 6 months
- C) At clinically appropriate intervals
- D) At 3 months
- E) When individual is re-assessed
- F) At least annually

"It is essential to check at appropriate intervals how the personal health budget is working, and, whether the care plan is achieving the agreed outcomes. It is also important that personal health budget holders know who to contact to discuss changes to their personal health budget should their needs change. It should be ongoing, and worked into best practice and local processes around delivering care.

Where direct payments are provided, all care plans must be formally reviewed as a minimum within three months of the person first receiving the direct payment. Following this, reviews should be held at appropriate intervals, but must occur at least annually." (Extract from Guidance on 'The Right To Have)'

*Best practice – link with other opportunities around assessment and review, to streamline the

Quiz – Question 5



Can a person top up a personal health budget?

- A) Yes
- B) No

Quiz – Question 5 Answers



Can a person top up a personal health budget?

A) Yes

B) No

The personal health budget must be sufficient to meet the health needs agreed in the support plan without requiring any contribution from the individual. NHS remains free at point of delivery and CHC must meet the costs required to meet the individual's assessed needs; individuals cannot top up in the same way that they are able to with social care funding. Negotiation may be required for individual situations to ensure the PHB remains reasonable in order to meet the needs, affordable/sustainable for the NHS, and equitable to others.





Further reading and support

Local Support



Integrated Care Board

NCL ICB PHB Team **do not hold a central budget for PHB delivery**, but can provide support with PHB development/implementation, advice and guidance. If support is required, please email: nclicb.personalhealthbudgets@nhs.net.

The PHB Team also support with organising the:

- PHB Panel, held weekly, to review and approve Direct Payment/Third Party set ups and monitoring process by money
 management services (Chaired by the Caretrack and PHB Specialist).
- PHB Case Management Meetings (used to be known as the PHB Borough Meeting) to provide peer support with solving practical problems faced when delivering PHB (Chaired by the Caretrack and PHB Specialist). Meeting dates for this year will be published shortly.

In process of organising:

- PHB Champions for ICB service areas who support and deliver PHBs, so teams will have dedicated person(s) who support and champion PHB Direct Payment delivery.
- PHB page for the public on the ICB website.
- PHB page for staff on the ICB Intranet.
- PHB Support Services Directory (formerly PHB Procurement Framework), will resemble a service directory, and will contain a
 range of PHB support service providers to help people to complete complex personalised care and support planning and
 brokerage, money management support and other PHB support services (estimated delivery period is Q3 of 23/24)

Following documents are/will be available on the ICB intranet:

- NCL ICB PHB Policy
- NCL ICB Generic PHB Processes
- NHSE PHB Quality Framework Self-Assessments for service users, ICB, teams and Case Manager
- PHB tools and resources to help with Personalised Care and Support Planning
- NCL Training Hub Internet: <u>www.ncltraininghub.org</u>



Further information



- NHS England website
- Personal Health Budgets Learning Network
 Personal Health Budgets elearning for healthcare (e-lfh.org.uk)
- Personalised Health and Care Framework
 Personalised health and care 2020: a framework for action GOV.UK (www.gov.uk)
- Personalised Care Institute

(Contains e-learning courses on Core Skills, Shared Decision Making and Personalised Care and Support Planning)

www.personalisedcareinstitute.org.uk

Further information



Personal Health Budgets

https://www.nhs.uk/nhs-services/help-with-health-costs/what-is-a-personal-health-budget/

- Personalised Care Collaborative Network
 https://www.coalitionforpersonalisedcare.org.uk/
- Personalised Care
 https://www.england.nhs.uk/personalisedcare/
- Patient Stories
 NHS England » Personal health budgets in action
- NHSE Events
 https://www.events.england.nhs.uk/

Questions







Thank you for listening and attending

